MAIL TO: Office of the Attorney General Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470

STREET ADDRESS: 1300 | Street Sacramento, CA 95814 Telephone: (916) 323-5079

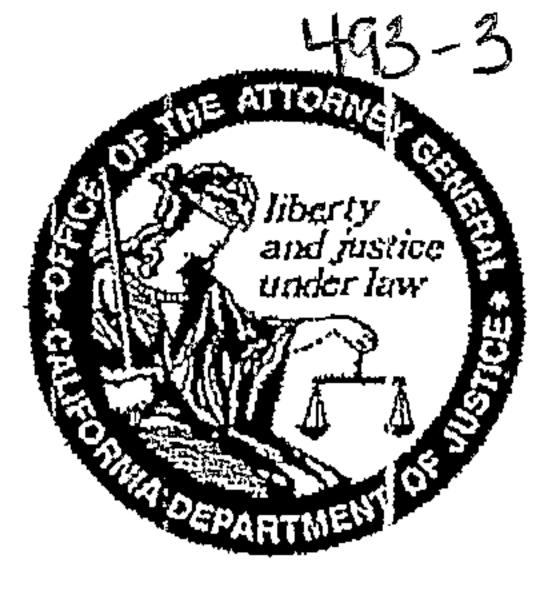
WEB SITE ADDRESS:

COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES

ANNUAL FINANCIAL REPORT FOR 2003 (California Government Code Section 12599)

Failure to file annual financial report by January 30th annually for each calendar year of solicitation may result in late fees as defined in Government Code Section 12586.1

An annual financial report must be filed for each event



http://ag.ca.gov/charities/	for each charity solicited	for during the previous calendar year.	··- ··-		
Name and Address of Comm	nercial Fundraiser:	Name and Address of Charitable Organization:			
		CTNo	2577		
493), F\//		
	TITOTNICI TNICI	Natt. Assoc. of leteran to lice Ati			
NETWORK ADVER' 17915 VENTURA BL		Name of charity / -7+4	_ /		
	1316	Address of charity			
		Maria Catara X	0.5		
)	City, State, and ZIP code of charity			
Figures from (check one): N	lational Campaign California Campai	gn 🔲			
ANV Silos		\mathcal{M}_{a}			
(Type of activity)		(Date or dates must be shown)	. 20		
(Type of dollarity)					
	nercial fundraiser and charity based upon a fe	e or percentage of revenue? Fee Percentage Other			
If other, provide brief e	explanation :				
1. REVENUE	<u>.</u>	•			
A. Cash contributions					
B. Entertainment sales or a	dmission charges	B,			
C. Sales from products		C.			
D. Advertisement sales		65,555 D.			
E. Membership fees		<u> </u>			
F. Other sources: (Specify	/}				
a	· · · · · · · · · · · · · · · · · · ·	Fa.			
b	<u> </u>	Fb.	† †		
C	······································	Fc.			
d		Fd.	-6-6-20		
G. TOTAL REVENUE	··	$\frac{c}{c}$	<u> </u>		
2. EXPENSES		3/			
A. Fees or commissions		59815.	: !		
B. Salaries	* *	.500 B.			
C. Payroll taxes	·	c.	* * * * * * * * * * * * * * * * * * *		
D. Employee benefits	i 1	D,	i I		
E. Cost of merchandise for	resale .	E.			
F. Cost of entertainment		F.			
G. Postage		G.	•		
H. Advertising		H.	# ₹ *		
I. Telephone		<u> </u>	; ;		
J. Rental of equipment		J.	•		
K. Facilities charge		K.			
L. Permits		<u>-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
M. Other expenses: (Specif	fy) .				
a. 		Ma.			
b		Mb.			
Ç		MC.	in 21		
N. TOTAL EXPENSES			7() 31		
14. I O I WE EVE ENGED			N.		

COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES ANNUAL FINANCIAL REPORT FOR 20_____ (California Government Code Section 12599) Page 2 3. Amount to charity (subtract line 2N from line 1G)

3. Amount to charity (subtract line 2N from line 1G)					$\bigcirc \bigcirc $		
U.						1	
4	Less saldities al funducicios expenses poid by ober	ity including foo n	aid to commercial fundraiser (to be complet	ed by charity)			
4.	Less additional fundraising expenses paid by char	ith Meinama i'ee b	atu to committe ciai rumutaisei (to ne compiei	ed by Griding	. •		
	, 			•		; ;	
5.	Less fair market value of goods and/or services us	ed for the event w	hich were paid by sponsor(s)	_	*	5.	
				_ •		1	
6.	Net proceeds realized by charity from the campaign	(subtract lines 4	and 5 from line 3)			6.	
,	· •					<u> </u>	
7.	(a) Does any officer, director, partner or owner of	the commercial fu	undraiser have any affiliation with or control	over, directly or in	directly, the charita'	ble organization	
	for which the commercial fundraiser has contra			_			
	Yes No if "yes" complete the fol			· ·			
	Li res <u>in yes complete inc re</u>					 - - - -	
	<u> </u>	<u></u>		1		<u> </u>	
	Name of officer, director, partner or owner	Nan	ne and address of charitable organization	Relat	ionship of officer, e	tc.	
	of commercial fundraiser		•	to cl	haritable organizatio	on	
 	······································				:		
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	<u></u>				<u></u>	<u> </u>	
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					•		
	· · · · · · · · · · · · · · · · · · ·	i	<u> </u>	<u> </u>			
	(b) For each affiliation identified in 7(a), attach cop	ov of the contract	between the commercial fundraiser and the	charity.	Р I		
	(b) Tor each armitation facilities in Fast attach ook) 	
	•		•	1	•		
					·		
	der penalties of perjury, I declare that I have examined	d this report, inclu	iding accompany ing documents, schedules	and st atements, ar	id to the best of my	knowledge and	
bel	ef, it is true, correct and complete.	-					
	' -	; ,	······································			-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Sig		1 1	Printed name	/	Γitle	. Date	
1		:	Steart tens	ATAINAL			
<u>-</u> ,	······································			V VV		1-140	
7 hi	s report must be signed by two officers or directors of	of the charitable o	rganization for verification.				
		•	4 _ •		_		
		DAVI	d DIENIKS CHI	Et FINANC	IAC OFC.	03 FEBOL	
Sig	nature of authorized officer/director (charity)	•	Printed name		Γitle	Date	
~				, 9 - 7	_	, ,	
		PAUL	Kutac	Fihancial	officer	2/03/04	
Sig	nature of authorized officer/director (charity)		Printed name		Title .	Date	
7		•	·				

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Attorney General's Registry of Charitable Trusts